

Received

JAN - 7 2021

-Brown County Clerk



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION

| | | | |
|---|--------------------------------------|---------------------------|------------------|
| A1. Name of Committee/Conduit (in full) Cheryl Berkear | | | |
| A2. Committee/Conduit ID Number (if applicable) | A3. Email Cherylberkear@gmail.com | A4. Phone 920-471-9110 | |
| A5. Mailing Address 517 12th Ave | A6. City Green Bay | A7. State WI | A8. Zip 54303 |

SECTION B: REPORT INFORMATION

| | | | | | |
|--|--|--|--|---|--|
| B1. Report Type (Choose One) | | | | B2. Special Election Date (if applicable) | |
| <input checked="" type="checkbox"/> January Continuing | <input type="checkbox"/> Spring Pre-Primary | <input type="checkbox"/> Fall Pre-Primary | <input type="checkbox"/> Special Pre-Primary | | |
| <input type="checkbox"/> July Continuing | <input type="checkbox"/> Spring Pre-Election | <input type="checkbox"/> September | <input type="checkbox"/> Special Pre-Election | | |
| | | <input type="checkbox"/> Fall Pre-Election | <input type="checkbox"/> Special Post-Election | | |
| Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1. Review the filing calendar with reporting periods online at: https://ethics.wi.gov/FilingCalendar | | | B3. Reporting Period Start Date 10-20-20 | | |
| | | | B4. Reporting Period End Date 12-31-20 | | |
| Party and Legislative Campaign Committees Only | | | | | |
| B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) | | | | | |
| <input checked="" type="checkbox"/> General Fund <input type="checkbox"/> Segregated Fund | | | | | |

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

| | |
|---|--|
| Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. | C1. Exemption Request and Affirmation <input type="checkbox"/> Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. <input checked="" type="checkbox"/> No, this registrant is not requesting exemption |
|---|--|

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).

Authorized Representative

| | | |
|------------------------------------|---------------------------------|--------------------|
| D1. Printed Name Cheryl Berkear | D2. Signature Cheryl Berkear | D3. Date 1-7-21 |
|------------------------------------|---------------------------------|--------------------|

****END OF REPORT****



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

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SECTION A: REGISTRANT INFORMATION

A1. Name of Committee/Conduit (in full)

Berndt for Brown County Executive

A2. Committee/Conduit ID Number (if applicable)

A3. Email

berndt_mark@yahoo.com

A4. Phone

(920) 246-5729

A5. Mailing Address

1044 WRIGHTSTOWN ROAD

A6. City

DE PERE

A7. State

WI

A8. Zip

54115

SECTION B: REPORT INFORMATION

B1. Report Type (Choose One)

☒ January Continuing

☐ July Continuing

☐ Spring Pre-Primary

☐ Spring Pre-Election

☐ Fall Pre-Primary

☐ September

☐ Fall Pre-Election

☐ Special Pre-Primary

☐ Special Pre-Election

☐ Special Post-Election

B2. Special Election Date (if applicable)

Reporting Period

The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.

Review the filing calendar with reporting periods online at: <https://Ethics.wi.gov/FilingCalendar>

B3. Reporting Period Start Date

7/1 /20

B4. Reporting Period End Date

1-15-2021 (12-31-2021)

Party and Legislative Campaign Committees Only

B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One)

☒ General Fund

☐ Segregated Fund

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

Filing Exemption

Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot.

C1. Exemption Request and Affirmation

☐ Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year.

☒ No, this registrant is not requesting exemption

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. STAT. § 11.0103(3)(d).

Authorized Representative

D1. Printed Name

Mark Berndt

D2. Signature

Mark Berndt

D3. Date

12/23/20

****END OF REPORT****

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Brown County Clerk



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STATE OF WISCONSIN

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SECTION A: REGISTRANT INFORMATION

| | | | |
|--|--|--|------------------------|
| A1. Name of Committee/Conduit (in full) <i>Friends of Megan Borchardt</i> | | | |
| A2. Committee/Conduit ID Number (if applicable) | | A3. Email <i>meganborchart1@gmail.com</i> | A4. Phone |
| A5. Mailing Address <i>1146 9th St.</i> | | A6. City <i>Green Bay</i> | A7. State <i>WI</i> |
| | | A8. Zip <i>54304</i> | |

SECTION B: REPORT INFORMATION

| | | | | | |
|---|--|--|--|---|--|
| B1. Report Type (Choose One) | | | | B2. Special Election Date (if applicable) | |
| <input checked="" type="checkbox"/> January Continuing | <input type="checkbox"/> Spring Pre-Primary | <input type="checkbox"/> Fall Pre-Primary | <input type="checkbox"/> Special Pre-Primary | | |
| <input type="checkbox"/> July Continuing | <input type="checkbox"/> Spring Pre-Election | <input type="checkbox"/> September | <input type="checkbox"/> Special Pre-Election | | |
| | | <input type="checkbox"/> Fall Pre-Election | <input type="checkbox"/> Special Post-Election | | |
| Reporting Period <i>The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.</i> | | | | B3. Reporting Period Start Date <i>July 1st 2020</i> | |
| Review the filing calendar with reporting periods online at: https://ethics.wi.gov/FilingCalendar | | | | B4. Reporting Period End Date <i>Dec. 31st 2020</i> | |
| Party and Legislative Campaign Committees Only | | | | | |
| B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) | | | | | |
| <input type="checkbox"/> General Fund <input type="checkbox"/> Segregated Fund | | | | | |

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

| | |
|--|--|
| Filing Exemption <i>Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot.</i> | C1. Exemption Request and Affirmation <input type="checkbox"/> Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. <input checked="" type="checkbox"/> No, this registrant is not requesting exemption |
|--|--|

SECTION D: CERTIFICATION

| | | |
|--|---|-----------------------------|
| <i>I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under WIS. STAT. § 11.0103(3)(d).</i> | | |
| Authorized Representative | | |
| D1. Printed Name <i>Megan Borchardt</i> | D2. Signature <i>Megan Borchardt</i> | D3. Date <i>1/8/2021</i> |

****END OF REPORT****



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

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JAN 11 2021
Brown County Clerk

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SECTION A: REGISTRANT INFORMATION

| | | | |
|--|---|----------------------------------|-------------------------|
| A1. Name of Committee/Conduit (in full) Buckley for County Board | | | |
| A2. Committee/Conduit ID Number (if applicable) | A3. Email rbuckleyd12@yahoo.com | A4. Phone 520 497-3052 | |
| A5. Mailing Address 3249 West Point Rd. | A6. City Green Bay | A7. State WI | A8. Zip 54313 |

SECTION B: REPORT INFORMATION

| | | | | |
|---|--|--|--|---|
| B1. Report Type (Choose One) <input checked="" type="checkbox"/> January Continuing <input type="checkbox"/> July Continuing <input type="checkbox"/> Spring Pre-Primary <input type="checkbox"/> Spring Pre-Election <input type="checkbox"/> Fall Pre-Primary <input type="checkbox"/> September <input type="checkbox"/> Fall Pre-Election <input type="checkbox"/> Special Pre-Primary <input type="checkbox"/> Special Pre-Election <input type="checkbox"/> Special Post-Election | | | | B2. Special Election Date (if applicable) |
| Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1. Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar | | B3. Reporting Period Start Date 7-1-2020 | | |
| Party and Legislative Campaign Committees Only | | B4. Reporting Period End Date 12-31-2020 | | |
| B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) <input type="checkbox"/> General Fund <input type="checkbox"/> Segregated Fund | | | | |

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

| | |
|---|--|
| Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. | C1. Exemption Request and Affirmation <input type="checkbox"/> Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. <input checked="" type="checkbox"/> No, this registrant is not requesting exemption |
|---|--|

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).

| | | |
|--|-------------------|----------------------------|
| Authorized Representative | | |
| D1. Printed Name Peterson J. Buckley | D2. Signature | D3. Date 1-11-21 |

****END OF REPORT****

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Chu for Supervisor

Street Address

1633 E. Mason St.

City, State and Zip Code

Green Bay, WI 54302

OFFICE USE ONLY

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☒ January Continuing ☐ Pre-Primary ☐ Spring ☐ Fall ☐ Special
☐ July Continuing ☐ Pre-Election ☐ Termination Report
☐ September Continuing

also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

| | Column A This Period | Column B Calendar Year-To-Date |
|---|-------------------------|--------------------------------------|
| 1A. Contributions (Including Loans) from Individuals | \$ <i>0</i> | \$ <i>2,664.09</i> |
| 1B. Contributions from Committees (Transfers-In) | \$ | \$ |
| 1C. Other Income and Commercial Loans | \$ | \$ |
| TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) | \$ | \$ |

2. DISBURSEMENTS

| | | |
|--|------------------|--------------------|
| 2A. Gross Expenditures | \$ <i>160.00</i> | \$ <i>2,177.19</i> |
| 2B. Contributions to Committees (Transfers-Out) | \$ | \$ |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ | \$ |

CASH SUMMARY

| | |
|---|------------------|
| Cash Balance Beginning of Report | \$ <i>647.50</i> |
| Total Receipts | \$ <i>0</i> |
| Subtotal | \$ <i>647.50</i> |
| Total Disbursements | \$ <i>160.00</i> |
| CASH BALANCE END OF REPORT | \$ <i>487.50</i> |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) | \$ <i>-</i> |
| LOANS (Balance at the Close of This Period-3B) | \$ <i>-</i> |

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-Brown County Clerk*

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer

Jim Hutchison

Signature of Candidate or Treasurer

Jim Hutchison

Date: *1-14-21*

Email *Jim.hutchis@gmail.com*

Daytime Phone: *920 819 8015*

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss. 11.1400, 11.1401, Wis. Stats.

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Page ____ of ____

Complete Committee Name

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made | Specific Purpose of Expenditure | Amount |
|---------------------|--|---------------------------------|--------|
| 9-15-20 | Facebook | Fees (Paid advertisement) | 40.00 |
| 7-15-20 12-17-20 | North Shore Bank 1901 Main ST Green Bay, WI 54302 | Bank Fees | 120.00 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$ 160.00

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES

\$

TOTAL EXPENDITURES

\$ 2,177.19

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JAN 15 2021
-Brown County Clerk

****END OF REPORT****



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SECTION A: REGISTRANT INFORMATION

| | | | |
|---|---|-----------------------------|------------------|
| A1. Name of Committee/Conduit (in full) Friends of Todd Delain | | | |
| A2. Committee/Conduit ID Number (if applicable) | A3. Email friends of todd delain@gmail.com | A4. Phone (920) 265-3834 | |
| A5. Mailing Address 3838 Concord Road | A6. City New Franken | A7. State WI | A8. Zip 54229 |

SECTION B: REPORT INFORMATION

| | | | | |
|---|--|--|--|---|
| B1. Report Type (Choose One) <input checked="" type="checkbox"/> January Continuing <input type="checkbox"/> July Continuing <input type="checkbox"/> Spring Pre-Primary <input type="checkbox"/> Spring Pre-Election <input type="checkbox"/> Fall Pre-Primary <input type="checkbox"/> September <input type="checkbox"/> Fall Pre-Election <input type="checkbox"/> Special Pre-Primary <input type="checkbox"/> Special Pre-Election <input type="checkbox"/> Special Post-Election | | | | B2. Special Election Date (if applicable) |
| Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1. Review the filing calendar with reporting periods online at: https://ethics.wi.gov/FilingCalendar | | B3. Reporting Period Start Date September 1, 2020 | | |
| Party and Legislative Campaign Committees Only | | B4. Reporting Period End Date December 31, 2020 | | |
| B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) <input checked="" type="checkbox"/> General Fund <input type="checkbox"/> Segregated Fund | | | | |

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

Filing Exemption

Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot.

C1. Exemption Request and Affirmation

- ☐ Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year.
☒ No, this registrant is not requesting exemption

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. STAT. § 11.0103(3)(d).

Authorized Representative

| | | |
|------------------------------------|---------------------------------|--------------------|
| D1. Printed Name Todd J. Delain | D2. Signature Todd J. Delain | D3. Date 1-4-21 |
|------------------------------------|---------------------------------|--------------------|

****END OF REPORT****



Brown County

CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

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SECTION A: REGISTRANT INFORMATION

| | | | |
|--|--|--|------------------------------------|
| A1. Name of Committee/Conduit (in full) Eisenheim for a Better Green Bay | | | |
| A2. Committee/Conduit ID Number (if applicable) | | A3. Email erik.b.eisenheim@gmail.com | A4. Phone (920) 430-8338 |
| A5. Mailing Address 843 Dousman Street | | A6. City Green Bay | A7. State WI |
| | | A8. Zip 54303 | |

SECTION B: REPORT INFORMATION

| | | | | |
|--|--|--|--|--|
| B1. Report Type (Choose One) <input checked="" type="checkbox"/> January Continuing <input type="checkbox"/> July Continuing <input type="checkbox"/> Spring Pre-Primary <input type="checkbox"/> Spring Pre-Election <input type="checkbox"/> Fall Pre-Primary <input type="checkbox"/> September <input type="checkbox"/> Fall Pre-Election <input type="checkbox"/> Special Pre-Primary <input type="checkbox"/> Special Pre-Election <input type="checkbox"/> Special Post-Election | | | | B2. Special Election Date (if applicable) |
| Reporting Period <i>The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.</i> <i>Review the filing calendar with reporting periods online at: https://Ethics.wi.gov/FilingCalendar</i> | | B3. Reporting Period Start Date 7/1/20 | | |
| | | B4. Reporting Period End Date 12/31/2020 | | |
| Party and Legislative Campaign Committees Only | | | | |
| B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) <input type="checkbox"/> General Fund <input type="checkbox"/> Segregated Fund | | | | |

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

| | |
|--|--|
| Filing Exemption <i>Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot.</i> | C1. Exemption Request and Affirmation <input type="checkbox"/> Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. <input checked="" type="checkbox"/> No, this registrant is not requesting exemption |
|--|--|

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).

| | | |
|---|--------------------------|----------------------------|
| Authorized Representative | | |
| D1. Printed Name Erik Eisenheim | D2. Signature | D3. Date 1/15/21 |

****END OF REPORT****

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JAN 15 2021
Brown County Clerk

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Patrick Evans

Street Address

1692 Nancy Ave.

City, State and Zip Code

Green Bay, WI 54303

OFFICE USE ONLY

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JAN - 5 2021
Brown County Clerk*

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☒ January Continuing *2021* ☐ Pre-Primary ☐ Spring ☐ Fall ☐ Special ☐ Termination Report
☐ July Continuing ☐ Pre-Election ☐ also complete Schedule 4
☐ September Continuing

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

| | Column A This Period | Column B Calendar Year-To-Date |
|---|-------------------------|--------------------------------------|
| 1A. Contributions (Including Loans) from Individuals | \$ <i>0.00</i> | \$ <i>0.00</i> |
| 1B. Contributions from Committees (Transfers-In) | \$ <i>0.00</i> | \$ <i>0.00</i> |
| 1C. Other Income and Commercial Loans | \$ <i>0.00</i> | \$ <i>0.00</i> |
| TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) | \$ <i>0.00</i> | \$ <i>0.00</i> |

2. DISBURSEMENTS

| | | |
|--|----------------|----------------|
| 2A. Gross Expenditures | \$ <i>0.00</i> | \$ <i>0.00</i> |
| 2B. Contributions to Committees (Transfers-Out) | \$ <i>0.00</i> | \$ <i>0.00</i> |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ <i>0.00</i> | \$ <i>0.00</i> |

CASH SUMMARY

| | |
|---|---------------------|
| Cash Balance Beginning of Report | \$ <i>2,418.15</i> |
| Total Receipts | \$ <i>0.00</i> |
| Subtotal | \$ <i>2,418.15</i> |
| Total Disbursements | \$ <i>0.00</i> |
| CASH BALANCE END OF REPORT | \$ <i>2,418.15</i> |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) | \$ <i>0.00</i> |
| LOANS (Balance at the Close of This Period-3B) | \$ <i>30,000.00</i> |

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer

Patrick M. Evans

Signature of Candidate or Treasurer

Patrick M. Evans
Email *patrick.evans@att.net*

Date: *01/05/2021*

Daytime Phone: *920-494-5221*

NOTE: The information on this form is required by information may subject you to the penalties of ss.11.

ETHCF-2L (Rev. 01/16) The Wisconsin Ethics C

****END OF REPORT****

.0804, 11.0904, Wis. Stats. Failure to provide the

must be filed with your local clerk.



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

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Brown County Clerk

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SECTION A: REGISTRANT INFORMATION

| | | | |
|---|--|--|---------------------------|
| A1. Name of Committee/Conduit (in full) Friends of Casey Hicks | | | |
| A2. Committee/Conduit ID Number (if applicable) | | A3. Email hicksforcountyboard@gmail.com | A4. Phone 262-365-7715 |
| A5. Mailing Address 1332 Angels Rdh Apt. 28 | | A6. City De Pere | A7. State WI |
| | | A8. Zip 54115 | |

SECTION B: REPORT INFORMATION

| | | | | |
|---|--|---|--|---|
| B1. Report Type (Choose One) <input checked="" type="checkbox"/> January Continuing <input type="checkbox"/> July Continuing <input type="checkbox"/> Spring Pre-Primary <input type="checkbox"/> Spring Pre-Election <input type="checkbox"/> Fall Pre-Primary <input type="checkbox"/> September <input type="checkbox"/> Fall Pre-Election <input type="checkbox"/> Special Pre-Primary <input type="checkbox"/> Special Pre-Election <input type="checkbox"/> Special Post-Election | | | | B2. Special Election Date (if applicable) |
| Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1. Review the filing calendar with reporting periods online at: https://ethics.wi.gov/FilingCalendar | | B3. Reporting Period Start Date 7/1/20 | | |
| | | B4. Reporting Period End Date 12/31/21 | | |
| Party and Legislative Campaign Committees Only | | | | |
| B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) <input type="checkbox"/> General Fund <input type="checkbox"/> Segregated Fund | | | | |

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

| | |
|---|--|
| Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. | C1. Exemption Request and Affirmation <input type="checkbox"/> Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. <input checked="" type="checkbox"/> No, this registrant is not requesting exemption |
|---|--|

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. STAT. § 11.0103(3)(d).

| | | |
|------------------------------------|---------------------------------|---------------------|
| Authorized Representative | | |
| D1. Printed Name Casey L. Hicks | D2. Signature Casey L. Hicks | D3. Date 1/11/21 |

****END OF REPORT****



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

Received
JAN - 8 2021
Brown County Clerk

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION

A1. Name of Committee/Conduit (in full)

Friends of Emily Jacobson

A2. Committee/Conduit ID Number (if applicable)**A3. Email**

emilydistrict5@gmail.com

A4. Phone

920-288-2602

A5. Mailing Address

1553 Morrow St

A6. City

Green Bay wis

A7. State

WI

A8. Zip

54302

SECTION B: REPORT INFORMATION

B1. Report Type (Choose One)

☒ January Continuing

☐ July Continuing

☐ Spring Pre-Primary

☐ Spring Pre-Election

☐ Fall Pre-Primary

☐ September

☐ Fall Pre-Election

☐ Special Pre-Primary

☐ Special Pre-Election

☐ Special Post-Election

B2. Special Election Date (if applicable)**Reporting Period**

The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.

Review the filing calendar with reporting periods online at: <https://Ethics.wi.gov/FilingCalendar>

B3. Reporting Period Start Date

7-1-2020

B4. Reporting Period End Date

12-31-2020

Party and Legislative Campaign Committees Only**B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One)**

☒ General Fund

☐ Segregated Fund

N/A

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

Filing Exemption

Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot.

C1. Exemption Request and Affirmation

☒ Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year.

☐ No, this registrant is not requesting exemption

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. STAT. § 11.0103(3)(d).

Authorized Representative**D1. Printed Name**

Emily Jacobson

D2. Signature

Emily Jacobson

D3. Date

7-1-7-2021

****END OF REPORT****



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

Received
JAN 11 2021
Brown County Clerk

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION

| | | | |
|---|---|----------------------------------|-------------------------|
| A1. Name of Committee/Conduit (in full) Thomas Lund | | | |
| A2. Committee/Conduit ID Number (if applicable) | A3. Email lundkee4@netnet.net | A4. Phone 920-662-2355 | |
| A5. Mailing Address 2091 Maple Ln | A6. City Swamico | A7. State WI | A8. Zip 54313 |

SECTION B: REPORT INFORMATION

| | | | | |
|---|--|--|--|---|
| B1. Report Type (Choose One) <input checked="" type="checkbox"/> January Continuing <input type="checkbox"/> July Continuing <input type="checkbox"/> Spring Pre-Primary <input type="checkbox"/> Spring Pre-Election <input type="checkbox"/> Fall Pre-Primary <input type="checkbox"/> September <input type="checkbox"/> Fall Pre-Election <input type="checkbox"/> Special Pre-Primary <input type="checkbox"/> Special Pre-Election <input type="checkbox"/> Special Post-Election | | | | B2. Special Election Date (if applicable) |
| Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1. Review the filing calendar with reporting periods online at: https://ethics.wi.gov/FilingCalendar | | B3. Reporting Period Start Date 7/1/2020 | | |
| Party and Legislative Campaign Committees Only | | B4. Reporting Period End Date 12/31/2020 | | |
| B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) <input type="checkbox"/> General Fund <input type="checkbox"/> Segregated Fund | | | | |

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

| | |
|---|--|
| Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. | C1. Exemption Request and Affirmation <input type="checkbox"/> Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. <input checked="" type="checkbox"/> No, this registrant is not requesting exemption |
|---|--|

SECTION D: CERTIFICATION

| | | |
|---|-------------------|----------------------------|
| I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d). | | |
| Authorized Representative | | |
| D1. Printed Name Thomas Lund | D2. Signature | D3. Date 1/11/21 |

****END OF REPORT****

CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

MOYNIHAN COMMITTEE FOR RESPONSIBLE GOVERNMENT

Street Address

2444 BABCOCK RD A

City, State and Zip Code

ASHWAUBENON, WI 54313

Received
JAN 14 2021
-Brown County Clerk

OFFICE USE ONLY

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☒ January Continuing 2021

☐ Pre-Primary

☐ July Continuing

☐ Spring

☐ Fall

☐ Special

☐ September Continuing

☐ Pre-Election

☐ Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

| | Column A This Period | Column B Calendar Year-To-Date |
|---|-------------------------|--------------------------------------|
| 1A. Contributions (Including Loans) from Individuals | \$ — | \$ 3,680.00 |
| 1B. Contributions from Committees (Transfers-In) | \$ — | \$ 100.00 |
| 1C. Other Income and Commercial Loans | \$.06 | \$.98 |
| TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) | \$.06 | \$ 3,780.98 |

2. DISBURSEMENTS

| | | |
|--|------|-------------|
| 2A. Gross Expenditures | \$ — | \$ 2,510.16 |
| 2B. Contributions to Committees (Transfers-Out) | \$ — | \$ — |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ — | \$ 2,510.16 |

CASH SUMMARY

| | |
|---|-------------|
| Cash Balance Beginning of Report | \$ 1,355.74 |
| Total Receipts | \$.06 |
| Subtotal | \$ 1,355.80 |
| Total Disbursements | \$ — |
| CASH BALANCE END OF REPORT | \$ 1,355.80 |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) | \$ — |
| LOANS (Balance at the Close of This Period-3B) | \$ — |

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer

PATRICK W. MOYNIHAN, JR.

Signature of Candidate or Treasurer

patrickmoynihanjr@gmail.com

Date: 01/14/21

Daytime Phone: 920-448-4016

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss. 11.1400, 11.1401, Wis. Stats.

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name

MOYNIHAN COMMITTEE FOR RESPONSIBLE GOVERNMENT

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Contributor | Occupation (if year-to-date total exceeds \$200) | Amount of Contribution | Y-T-D Total |
|------|--|--|---------------------------|----------------|
| | NA | | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____ | | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____ | | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____ | | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____ | | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____ | | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____ | | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____ | | | |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Page 2 of 7

Complete Committee Name

MOYNIHAN COMMITTEE FOR RESPONSIBLE GOVERNMENT

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name of Committee, Mailing Address and Zip Code | Amount of Contribution |
|---|--|------------------------|
| | <p align="center">NA</p> <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | |
| SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE | | \$ <u> </u> |
| TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES | | \$ <u> </u> |

SCHEDULE 1-C
RECEIPTS
Other Income and Commercial Loans

Page 3 of 7

Complete Committee Name

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
|---------------------------------|--|---------------------------------------|----------|
| 09/30- 12/31 2020 | NICOLET NATIONAL BANK 111 N. WASHINGTON ST GREEN BAY, WI 54301 | CAMPAIGN CHECKING ACCOUNT INTEREST | .06 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| SUBTOTAL OTHER INCOME THIS PAGE | | | \$ - .06 |
| TOTAL ITEMIZED OTHER INCOME | | | \$ - .06 |
| TOTAL OTHER INCOME | | | \$.06 |

SCHEDULE 2-A

DISBURSEMENTS
Gross ExpendituresPage 4 of 7

Complete Committee Name

Complete Committee Name MOYNIHAN COMMITTEE FOR RESPONSIBLE GOVERNMENT

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made | Specific Purpose of Expenditure | Amount |
|--|--|---------------------------------|----------------------|
| | NA | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE | | | \$ <u> </u> |
| TOTAL ITEMIZED EXPENDITURES | | | \$ <u> </u> |
| TOTAL UNITEMIZED EXPENDITURES | | | \$ <u> </u> |
| TOTAL EXPENDITURES | | | \$ <u> </u> |

SCHEDULE 2-B
DISBURSEMENTS
Contributions To Committees
(Transfers-Out)

Page 5 of 7

Complete Committee Name

MOYNIHAN COMMITTEE FOR RESPONSIBLE GOVERNMENT

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code | Amount | Y-T-D Total |
|--|--|----------------------|-------------------|
| | NA | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE | | \$ <u> </u> | <u> </u> |
| TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES | | \$ <u> </u> | <u> </u> |

SCHEDULE 3-A**Incurred Obligations Excluding Loans
ADDITIONAL DISCLOSURE**Page 6 of 7

Complete Committee Name

MOYNIHAN COMMITTEE FOR RESPONSIBLE GOVERNMENT

Instructions for completing schedules are on the back of each schedule.

| | | Outstanding Balance Beginning This Period | New Obligations or Additions This Period | Cumulative Payments This Period | Outstanding Balance At Close of This Period |
|-------------|--|---|--|------------------------------------|---|
| Date / / | Full Name, Mailing Address and Zip Code of Creditor <u>NA</u> | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | | Nature of Debt (Purpose) | | | |

SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE

\$

—

TOTAL ITEMIZED OBLIGATIONS

\$

—

TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS

\$

—

TOTAL INCURRED OBLIGATIONS

\$

—

SCHEDULE 3-B**Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE**Page 7 of 7

Complete Committee Name

MOYNIHAN COMMITTEE FOR RESPONSIBLE GOVERNMENT

Instructions for completing schedules are on the back of each schedule.

| | | | | | |
|-------------|--|--|-----------------------|---------------------------------|--|
| | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
| Date / / | NA | | | | |

List All Endorsers or Guarantors (if any)

| | |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |

| | | | | | |
|-------------|--|--|-----------------------|---------------------------------|--|
| | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
| Date / / | | | | | |

List All Endorsers or Guarantors (if any)

| | |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |

| | | | | | |
|-------------|--|--|-----------------------|---------------------------------|--|
| | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
| Date / / | | | | | |

List All Endorsers or Guarantors (if any)

| | |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |

UBTOTAL OUTSTANDING LOANS THIS PAGE

\$ —

****END OF REPORT****

TOTAL OUTSTANDING LOANS

\$ —



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

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SECTION A: REGISTRANT INFORMATION

| | | | |
|---|--|--|----------------------------------|
| A1. Name of Committee/Conduit (in full) <i>Citizens for William Peters</i> | | | |
| A2. Committee/Conduit ID Number (if applicable) | | A3. Email <i>William.joseph.jr@icloud.com</i> | A4. Phone <i>920-461-2847</i> |
| A5. Mailing Address <i>233 N. Ashland Ave.</i> | | A6. City <i>Green Bay</i> | A7. State <i>WI</i> |
| | | A8. Zip <i>54303</i> | |

SECTION B: REPORT INFORMATION

| | | | | |
|---|--|--|--|---|
| B1. Report Type (Choose One) <input checked="" type="checkbox"/> January Continuing <input type="checkbox"/> July Continuing <input type="checkbox"/> Spring Pre-Primary <input type="checkbox"/> Spring Pre-Election <input type="checkbox"/> Fall Pre-Primary <input type="checkbox"/> September <input type="checkbox"/> Fall Pre-Election <input type="checkbox"/> Special Pre-Primary <input type="checkbox"/> Special Pre-Election <input type="checkbox"/> Special Post-Election | | | | B2. Special Election Date (if applicable) |
| Reporting Period <i>The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.</i> <i>Review the filing calendar with reporting periods online at: https://ethics.wi.gov/FilingCalendar</i> | | B3. Reporting Period Start Date <i>7/1/2020</i> | | |
| | | B4. Reporting Period End Date <i>12/31/2020</i> | | |
| Party and Legislative Campaign Committees Only | | | | |
| B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) <input checked="" type="checkbox"/> General Fund <input type="checkbox"/> Segregated Fund | | | | |

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

| | |
|---|---|
| Filing Exemption <i>Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot.</i> | C1. Exemption Request and Affirmation <input checked="" type="checkbox"/> Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. <input type="checkbox"/> No, this registrant is not requesting exemption |
|---|---|

SECTION D: CERTIFICATION

| | | |
|---|--|-------------------------------|
| I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d). | | |
| Authorized Representative | | |
| D1. Printed Name <i>William J. Peters Jr</i> | D2. Signature <i>William J. Peters Jr</i> | D3. Date <i>12/23/2020</i> |

****END OF REPORT****



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

Received
JAN 15 2021
Brown County Clerk

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION

| | | | |
|--|--------------------------------|---------------------------|------------------|
| A1. Name of Committee/Conduit (in full) Citizens for Sieber | | | |
| A2. Committee/Conduit ID Number (if applicable) | A3. Email CitizensforSieber | A4. Phone 920.680.6366 | |
| A5. Mailing Address 480 Maskeys Lane | A6. City Green Bay, WI | A7. State WI | A8. Zip 54311 |

SECTION B: REPORT INFORMATION

| | | | | |
|---|--|---|--|---|
| B1. Report Type (Choose One) <input checked="" type="checkbox"/> January Continuing <input type="checkbox"/> July Continuing <input type="checkbox"/> Spring Pre-Primary <input type="checkbox"/> Spring Pre-Election <input type="checkbox"/> Fall Pre-Primary <input type="checkbox"/> September <input type="checkbox"/> Fall Pre-Election <input type="checkbox"/> Special Pre-Primary <input type="checkbox"/> Special Pre-Election <input type="checkbox"/> Special Post-Election | | | | B2. Special Election Date (if applicable) |
| Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1. Review the filing calendar with reporting periods online at: https://ethics.wi.gov/FilingCalendar | | B3. Reporting Period Start Date 7/1/2020 | | |
| | | B4. Reporting Period End Date 12/31/2020 | | |
| Party and Legislative Campaign Committees Only | | | | |
| B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) <input checked="" type="checkbox"/> General Fund <input type="checkbox"/> Segregated Fund | | | | |

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

| | |
|---|--|
| Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. | C1. Exemption Request and Affirmation <input type="checkbox"/> Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. <input checked="" type="checkbox"/> No, this registrant is not requesting exemption |
|---|--|

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).

| | | |
|--------------------------------|-------------------|-----------------------|
| Authorized Representative | | |
| D1. Printed Name Tom Sieber | D2. Signature | D3. Date 1/15/2021 |

****END OF REPORT****

Received
JAN - 4 2021
Brown County Clerk



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION

| | | | |
|---|--|---|----------------------------------|
| A1. Name of Committee/Conduit (in full) <i>Streckenbach for Brown County Executive</i> | | | |
| A2. Committee/Conduit ID Number (if applicable) | | A3. Email <i>Streckenbachforwi@gmail.com</i> | A4. Phone <i>920.288.2231</i> |
| A5. Mailing Address <i>805 Miramar Dr</i> | | A6. City <i>Green Bay</i> | A7. State <i>WI</i> |
| | | A8. Zip <i>54301</i> | |

SECTION B: REPORT INFORMATION

| | | | | | |
|---|--|---|--|--|--|
| B1. Report Type (Choose One) | | | | B2. Special Election Date (if applicable) | |
| <input checked="" type="checkbox"/> January Continuing | <input type="checkbox"/> Spring Pre-Primary | <input type="checkbox"/> Fall Pre-Primary | <input type="checkbox"/> Special Pre-Primary | | |
| <input type="checkbox"/> July Continuing | <input type="checkbox"/> Spring Pre-Election | <input type="checkbox"/> September | <input type="checkbox"/> Special Pre-Election | | |
| | | | | <input type="checkbox"/> Special Post-Election | |
| Reporting Period <i>The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.</i> | | | B3. Reporting Period Start Date <i>7/1/2020</i> | | |
| Review the filing calendar with reporting periods online at: https://ethics.wi.gov/FilingCalendar | | | B4. Reporting Period End Date <i>12/31/2020</i> | | |
| Party and Legislative Campaign Committees Only | | | | | |
| B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) | | | | | |
| <input checked="" type="checkbox"/> General Fund <input type="checkbox"/> Segregated Fund | | | | | |

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

| | | |
|--|--|--|
| Filing Exemption <i>Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot.</i> | | C1. Exemption Request and Affirmation <input type="checkbox"/> Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. <input checked="" type="checkbox"/> No, this registrant is not requesting exemption |
|--|--|--|

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).

Authorized Representative

| | | |
|--|-------------------------------------|-------------------------------|
| D1. Printed Name <i>Troy Streckenbach</i> | D2. Signature <i>[Signature]</i> | D3. Date <i>12/30/2020</i> |
|--|-------------------------------------|-------------------------------|

****END OF REPORT****



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY
STATE OF WISCONSIN

Received
JAN 15 2021
Brown County Clerk

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION

| | | | |
|--|-------------------------------------|-----------------------------|------------------|
| A1. Name of Committee/Conduit (in full) Friends of Vander Leest | | | |
| A2. Committee/Conduit ID Number (if applicable) | A3. Email vanderleey@hotmail.com | A4. Phone (920) 737-0999 | |
| A5. Mailing Address 1616 9th Street | A6. City Green Bay | A7. State WI | A8. Zip 54304 |

SECTION B: REPORT INFORMATION

| | | | | |
|---|--|---|--|---|
| B1. Report Type (Choose One) <input checked="" type="checkbox"/> January Continuing <input type="checkbox"/> July Continuing <input type="checkbox"/> Spring Pre-Primary <input type="checkbox"/> Spring Pre-Election <input type="checkbox"/> Fall Pre-Primary <input type="checkbox"/> September <input type="checkbox"/> Fall Pre-Election <input type="checkbox"/> Special Pre-Primary <input type="checkbox"/> Special Pre-Election <input type="checkbox"/> Special Post-Election | | | | B2. Special Election Date (if applicable) |
| Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1. Review the filing calendar with reporting periods online at: https://ethics.wi.gov/FilingCalendar | | B3. Reporting Period Start Date 9/1/20 | | |
| Party and Legislative Campaign Committees Only | | B4. Reporting Period End Date 12-31-2021 | | |
| B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One) <input type="checkbox"/> General Fund <input type="checkbox"/> Segregated Fund | | | | |

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

| | |
|---|--|
| Filing Exemption Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance reports. Exempt status is effective only for the calendar year in which it is granted. Registrants wishing to remain on exempt status must renew each year. Candidates may not claim exemption in the year of their election before the day they appear on the ballot. | C1. Exemption Request and Affirmation <input type="checkbox"/> Yes, this registrant is eligible for a filing exemption and would like to request an exemption for this calendar year. <input checked="" type="checkbox"/> No, this registrant is not requesting exemption |
|---|--|

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. STAT. § 11.0103(3)(d).

| | | |
|--|---------------------------------------|-----------------------|
| Authorized Representative | | |
| D1. Printed Name John A. Vander Leest | D2. Signature John A. Vander Leest | D3. Date 1-15-2021 |

****END OF REPORT****